BIRCH, STEWART, KOLASCH & BIRCH, LLP

FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as

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1928-0126P

PLEASE NOTE:
YOU MUST
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FOLLOWING:

•	•	•	e original, first and sole inventor r (if plural inventors are named	•
Insert Title:		d for which a patent is sough	ht on the invention entitled:	
Fill in Appropriate Information -	the specification of which i	s attached hereto. If not att	ached hereto,	
For Use Without	•			as
Specification Attached:			; an	
MINCHEU:	the specificati	on was filed on		as PCT
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	•		d the contents of the above ide	· ·
	including the claims, as am	ended by any amendment re y to disclose information wh		•
State of the second second second			known or used in the United Sta	
	•	-	n any printed publication in any	,
\$1 a		, -	nis application, that the same wa ear prior to this application, that	•
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an har		- .	application filed by me or my leg	~ - /
			s) prior to this application, and the	~
	-	•	en filed in any country foreign to	1-
		, , ,	resentatives or assigns, except as	
		~	35, United States Code, §119 (,
			d below and have also identified a filing date before that of the a	, ,
100	priority is claimed:	iventor's cerumeate maving a	a minig date before diat of the	ipplication on which
Insert Priority				
Information:	Prior Foreign Application 0104915.4	$\operatorname{pn}(s)$	77-1	Priority Claimed
	(Number)	Great Britain (Country)	February 28 2001 (Month/Day/Year Filed)	
r 182 7 [((000114)/	(Madalata, Lay, Loui Latou)	Yes No
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No
And the second				
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No
Insert Provisional Application(s):	I hereby claim the beneapplication(s) listed below.		states Code, §119(e) of any Unit	ed States provisional
(if any)	(Application Number)		(Filing Date)	
·	(Application Number)		(Filing Date)	
ė.	All Foreign Applications, i Months for Designs) Prior		entor's Certificate Filed More s Application:	Than 12 Months (6
Insert Requested Information: (if appropriate)	Country	Арр	olication No. Date o	f Filing (Month/Day/Year)
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	listed below and, insofar as	the subject matter of each of	tates Code, §120 of any United at the claims of this application is by the first paragraph of Title 35,	not disclosed in the
	§112, I acknowledge the dut	y to disclose information wh	ich is material to patentability as able between the filing date of t	s defined in Title 37,

and the national or PCT international filing date of this application:

(Filing Date)

(Filing Date)

(Status - patented, pending, abandoned)

(Status - patented, pending, abandoned)

Page 1 of 2

(if any)

Insert Prior U.S. Application(s):

(Application Number)

(Application Number)

I hereby appeared the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

्या मार्का						
Full Name of First or Sole Inventor:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE	i de la companya de	DATE*	
Insert Name of Inventor Insert Date This	Georg	STROBL	long in	w.	20 Feb 2002	
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The state of the s	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)					
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Full Name of Fifth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
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^{*} DATE OF SIGNATURE